								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003												154	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TC	TAL CLAIMS		22		(Coldi(iii 2)				 T	OR 1 I	SMALL		
			NUMBER FILED		NUMBER EXTRA		·	ATE	FEE		RATE	FEE	
FOR			0.0		NOWB	-	SIC FEI	375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			A nin	us 20=	<u> </u>			\$ 9=	1185	OR	X\$18=		
IND	EPENDENT CL	AIMS	minus 3 =			۷	,	42	8/00	P OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL.	<u> </u>	OR	TOTAL		
11 10 / CLAIMS AS AMENDED - PART II								JIAL	<u> </u>	Un	OTHER	THAN	
11	(Column 1) (Column 2) (Column 3						SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.24	Minus	** 0	2	= Q		\$ 9=	180	OR	X\$18=		
	Independent  Minus			1 *** <u>5</u>		1-3	X	42 <u>-</u>	132	300	- X84≃		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=	, <u> </u>	OR	+280=		
		•				TOTAL		1	TOTAL				
	(Column 1)			(Column 2) (Column 3)			ADDIT. FEE			OR ADDIT. FEE			
AMENDMENT B	CLAIMS REMAINING		HIGHE		EST				ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA	Я	ATE .	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .	×	42=		OR	X84=	· . · · · · ·	
	rina i Priese	NIATION OF MIC	JUIPLE DEP	IPLE DEPENDENT CLAIM			+	40=		OR	+280=		
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIĞH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	t	Minus	**			X	9=		OR	X\$18=		
	Independent	*	Minus	***		=		42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							· <b>-</b> -		OR			
t If the patry is column 1 is less than the patry is set you 0.00 less than 2										OR	+280=		
** [	f the "Highest Nu	mber Previously Pa mber Previously Pa	iid For" IN THI:	S SPACE IS	less tha	n 20, enter *20.		TOTAL T. FEE		OR ,	TOTAL ADDIT. FEE		
		nber Previously Pai					r found i	the ap	propriate box	in cal	umn 1.		

FORM PTO-875 (Rev. 12/02)